

Let's Understand Public Health: A Free-flow Writing from Novice Learners

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ABSTRACT

Defining Public Health is a tough job, it does not have any definite limit. Here we cumulate knowledge from different fields of social sciences, health, and environmental sciences, which essentially makes public health a multidisciplinary field, at the same time we work in an interdisciplinary way, but on the other hand, public health transcends any orthodoxical conventional way to find the problem and attaining at a solution pertaining to population health. Here in this piece, we have attempted to present a novice's perspective of what public health is.

Keywords: Public Health, Preventive Health, Health Promotion.

The advent of COVID-19 has made us turn our heads toward this age-old concept of public health. In the era of the internet, when every piece of information is one click away from our tiny reflective screen, it is not very hard for everyone to know what public health is, what are its components, and what is it we talk about while we speak of preventive health. Talking about definitions in every book, all health organizations have abridged public health in four, or five sentences with some heavily appropriate terms. In most cases, definitions of public health bring in concepts like 'prevention of disease', 'prolonging life', 'promoting healthy life' 'enabling communities to take informed decisions' 'work in a collaborative manner' etc. but unfortunately for students and novice learners like me amongst those heavy words the true essence of public health often gets lost in the way. In this information-enriched era, knowledge is sufficiently available everywhere but how much of it gets translated into everyday actions is doubtful. In this piece, we tried to construct a bridge between available public health knowledges and curious minds out there.

We must look beyond the definitive presentation of health to acknowledge the wider aspects entangled with public health. Public health talks more about preventing diseases at the point much before the disease itself has started. Now essentially when a disease is not present in terms of some measurable form physical or mental, most of us do not seem to care much about our health. One of the major aspects of public health involves making ourselves maintain what we have health-wise, making "ourselves" able to make informed decisions regarding our health. Now this "ourselves" does not only include people from a particular socio-economic or cultural stratum. The biggest challenge in public health lies here, which

is to involve everyone. India houses approximately 150 crores of people amongst which according to NITI AYOGE's first Multidimensional Poverty Index report 2021 (MPI) 25% of our population is considered poor.¹ Moreover, there is a gross disparity in income and quality of life lead amongst Indian households throughout our country. In the said report whereas states like Kerala emerged as better in terms of having the lowest rate of poverty with only 0.71% population being poor, on the other hand, states like Bihar, Jharkhand, and Uttar Pradesh have the highest poverty across India with Bihar having 51.9% population being poor. India's extreme poverty statistics stand at 7%.² Delivering an equal standard of care that has to be easily accessible to all corners of a country with a mammoth population like India is a daunting task. Though current government spending on healthcare is on a slow increase to 2.1% in terms of percentage share in Gross Domestic Product (GDP) after the pandemic, still falls short of the ideal allocation of 5% envisaged by WHO.^{3,4} However, a big task for public health professionals is not only to highlight facts and problems but to work with them, attain a solution, to advocate for whatever is needed for a holistic improvement of the health of our people. Involving everyone from every stratum of life in the journey towards good health is a challenge. Some people are not even aware of their basic rights, enabling them to take health-related decisions is a long road ahead. India is a country of vast cultural and religious diversity. Multiple factors about cultural and religious beliefs play a role too in defining our people's health outcomes. As simple as a regular vaccination campaign can get greatly affected in terms of acceptability to our people. Promoting good health thus becomes a great effort. Changing

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or imparting new behaviour in us is quite difficult, people on the verge of trying hard to quit smoking will understand this. Now think about similar resistance multiplied by manifolds faced at a community level. Though influencing behaviour may have become easy nowadays due to social media but in maximum cases that is not for a good cause. As it is very easy to subtly drive someone over the edge by exploiting our common emotions for a short duration of time. But mostly good things take time to achieve so driving people to follow good health advice often goes in vain due to a lack of the long-term anchor which would hook them into it. Here comes the importance of social sciences research. Quantitative data does not always talk much. To put this in perspective let us draw a true scenario – Iron-Folic Acid (IFA) which is of tantamount importance for pregnant women and adolescent girls is freely given through primary health centres and schools via national health mission initiatives. A qualitative interview-based study conducted at Jawaharlal Institute of Postgraduate Medical Education and Research (JIPMER), Puducherry reported that one of the common myths amongst pregnant mothers about not consuming IFA tablets was that if they consume those tablets they may give birth to dark-complexioned babies, similar conceptions has been reported in other parts of India too in leading newspapers.^{5,6} Now merely doing a study entailing quantitative data regarding utilization won't shed much light on these conceptions, here we need to tap into the arenas of qualitative research which forms an integral part of social sciences. So basically, what We are trying to say is public health is thinking beyond conventional boundaries, taking a multifaceted approach with much broader inclusivity of all other fields in a collaborative manner. The public health workforce is also vast, it doesn't limit to only policymakers, experts, doctors, nurses, and administrators but includes a wide range of workers at the grassroot level chiefly ASHA

workers, community workers, Anganwadi workers, etc. They are the main pillars for delivering public health interventions in the remotest areas of India.

Stepping into the field of public health is a privilege, it grows on you, and it makes you a better human. It teaches us the importance of listening to everyone's perspectives, it makes you understand that there is no hierarchy in work, everyone responds to their own set of job responsibilities. Being a novice learner of public health, we would like to end this piece with saying "Welcome to Public Health".

CONFLICT OF INTEREST

The authors declare that there is no conflict of interest.

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